PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

MU14-12674

SMALL ENTITY

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,]	ı	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			ال سinus 20=		*	R		X\$ 9=		1	X\$18=	
INDEPENDENT CLAIMS			; minus 3 =		*					OR		Ø
		IDENT CLAIM PI			<u>.</u>			X42=		OR	X84=	0
								+140=		OR	+280=	ð
* If the difference in column 1 is less than zero					"0" in c	olumn 2		TOTAL		OR	TOTAL	750
CLAIMS AS AMENDED - PART II								'		•	OTHER	
_		(Column 1)	(Colum			(Column 3)	1 ,	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RAŢE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ן ן	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						IJ	+140=			+280=	
								+140=		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	1 r			1 1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	╽	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=]	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤	4.40			000	
								+140= TOTAL		OR	+280=	
								ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)	1 _					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X42=			X84=	
V	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT		CLAIM]	774-		OR	704=	·
*	of the enter in eater	mn 1 in lass that "	ho onto le e-l		. "0" :	h 0		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR TOTAL ADDIT. FEE												
		nber Previously Pa					er fou	nd in the and	rooriate box	c in col	lumn 1	